



Shadow Health and Well Being Board

Date:	Wednesday, 14 March 2012
Time:	5.00 pm
Venue:	NHS Wirral, Duncan Room, Old Market House, Hamilton Street, Birkenhead

Contact Officer: Fiona Johnstone
Tel: 0151 651 3914
e-mail: fiona.johnstone@wirral.nhs.uk
Website:

AGENDA

1. **WELCOME AND APOLOGIES**
2. **DECLARATIONS OF INTEREST**
3. **MINUTES (Pages 1 - 4)**

The minutes of the last Board meeting held on 14 December, 2011, are attached.
4. **PRESENTATION ON THE DEVELOPMENT OF CLINICAL COMMISSIONING GROUPS**
5. **PRESENTATION ON WIRRAL COUNCIL PLANNED DEVELOPMENTS FOR 2012-2013**
6. **UPDATE ON DEVELOPMENT OF HEALTHWATCH (Pages 5 - 10)**
7. **UPDATE ON PROGRESS WITH WORKSTREAMS**
 - 7a **Joint Strategic Needs Assessment to Joint Health and Wellbeing Strategy**

To follow.
 - 7b **Engagement (Pages 11 – 12)**
 - 7c **Public Health: Integrated Wellbeing Model (Pages 13 – 16)**

7d Joint Commissioning and Integrated Delivery

**7e Place Based Leadership Development Activity -
Leadership Behaviours and Making Difficult Decisions
April**

- 8. UPDATE ON THE DEVELOPMENT OF THE CHILD POVERTY STRATEGY AND ACTION PLAN (Pages 17 - 42)**
- 9. RELATIONSHIP BETWEEN THE HEALTH AND WELL BEING BOARD AND OVERVIEW AND SCRUTINY**
- 10. REQUEST FOR MEMBERSHIP**
- 11. DATE OF NEXT MEETING**

WIRRAL SHADOW HEALTH & WELLBEING BOARD

Minutes of the Board Meeting held on
Wednesday 14 December 2011
Committee Room 2 Wallasey Town Hall

Present:

Councillor S. Foulkes (Chair), Leader of the Council/Leader of Labour Group, Wirral

Councillor T. Harney, Leader of Liberal Democrat Group, Wirral

Councillor A. McArdle, Portfolio Holder for Social Care & Inclusion

Mr J. Wilkie, Chief Executive, Wirral Council

Ms F. Johnstone, Director of Public Health, NHS Wirral/Wirral Council

Dr S. Mukherjee, Medical Director, NHS Cheshire Warrington & Wirral

Dr A. Mantgani, Executive Clinical Lead, Wirral GP Commissioning Consortium

Mr D. Armstrong, Interim Director of Children & Young People's Services, Wirral Council

Mrs D. Hill, Chair, LINKs

Mrs S. Cumiskey, Chief Executive, Cheshire & Wirral Partnership Trust

Mr G. Doherty, Acting Chief Executive, Wirral University Hospital Trust

Mrs A. Roberts, CEO, Voluntary & Community Action Wirral

Mr R. Smith, Director of Operations & Performance, Clatterbridge Centre of Oncology

(representing Andrew Cannell)

Mr J. South, CEO, Wirral Community NHS Trust

Dr P. Naylor, GP Co-Chair, Wirral Health Commissioning Consortium

Dr G. Francis, GP Chair, Wirral NHS Alliance

Apologies

Councillor J. Green, Leader of Conservative Group, Wirral

Councillor Ann McLachlan, Portfolio Holder for Children's Services and Lifelong Learning

Howard Cooper, Interim Director of Adult Social Services, Wirral Council

Mr A. Cannell, Chief Executive, Clatterbridge Centre of Oncology

In attendance:

Mr K. Carbery, Business Support Manager, NHS Wirral (business support)

Mrs T. Woodhouse, Executive Assistant, NHS Wirral (minutes)

1. WELCOME AND APOLOGIES

All members were welcomed to the first Board meeting of the group. All apologies were duly noted.

2. DECLARATIONS OF INTEREST

It was reported that there were no declarations of interest.

3. MINUTES

As this was the first Board meeting there were no prior minutes.

4. TERMS OF REFERENCE

The members were advised that the formation of the Health & Wellbeing Board had arisen from the fact that the Health and Social Care Bill currently making its way through Parliament will expand local authorities' responsibilities for ensuring integration in the approach to health and social care provision in its area, and (subject to the final legislation) will require the establishment of a formal Board. The initial draft Terms of Reference were agreed by Council Cabinet on 23rd June 2011 to enable the first development meeting of the Shadow Board to take place.

The draft document as presented had been discussed at the two previous development sessions of members. This had resulted in the membership being expanded to include co-opted members.

Following discussions regarding voting rights it was agreed to accept the Terms of Reference as written and to note that the core membership will have voting rights. It was also agreed that the Terms of Reference would be reviewed periodically.

It was resolved that the Terms of Reference be accepted.

5. SHADOW BOARD DEVELOPMENT PLAN

The group was advised that Wirral had been successful in securing sponsorship by the National Leadership Academy. The plan was to use the resources provided through this funding to help establish the H&WB Board. The first development session results in agreeing the six projects noted in the report.

It had been agreed that members of the Board would indicate which of the projects they were likely to sponsor or lead on and also to agree the workstream order. Board members were asked to advise Fiona Johnstone of the projects they would like to sponsor or lead on. Arrangements will then be made to develop the work programme as regular updates would be required for future meetings.

It was agreed that the projects be addressed in the following order.

1. Making Difficult Decisions
2. Board Leadership Behaviours
3. JSNA and the Joint Strategic Health Strategy
4. Extending Engagement
5. Public Health Programme and Transition
6. Understanding how the H&WB can support the reshaping of services

6. JOINT STRATEGIC NEEDS ASSESSMENT

The paper, as presented, advised that the Joint Strategic Needs Assessment (JSNA) is a process to identify the current and future Health & Wellbeing needs of a population in a local authority area. It also outlined how the JSNA for Wirral is being developed and refreshed.

The work of the JSNA is directed through its Executive Board and the opportunity was taken to ask if members wished to join this committee or to nominate a member of their organisation. All were asked to submit names to Fiona Johnstone.

Following discussions it was resolved that the Board accept and approve the recommendations.

7. DEVELOPING EFFECTIVE COMMUNICATIONS

The H&WB Board will take on an important role as the forum for overseeing the improvements in health and wellbeing within the local community. Decisions would be based on the needs and assets of the local area and therefore it was important that an effective communications strategy is drafted. It was considered that engagement with the local population was important and necessary to ensure effective communications are established.

Following discussions it was agreed that a pooled resource of all available communications leads be established with a request to establish a draft communications strategy. Fiona Johnstone would lead on the project and all contact details are to be submitted to Kevin Carbery.

8. AOB

Discussions took place regarding the locations for the forthcoming development sessions. The following was agreed

- | | |
|-------------------|---------------------------|
| January session: | hosted by Sheena Cumiskey |
| February session: | hosted by Gary Doherty |

9. DATE OF NEXT MEETING

**The next Formal Board Meeting will take place on 13 March 2012
Committee Room 2, Wallasey Town Hall**

There being no further business the Chair closed the meeting at 6.00
pm

WIRRAL COUNCIL

HEALTH & WELLBEING OVERVIEW & SCRUTINY COMMITTEE

12 MARCH 2012

SUBJECT:	LINKS TRANSITION TO A LOCAL HEALTHWATCH ORGANISATION
WARD/S AFFECTED:	ALL
REPORT OF:	GRAHAM HODKINSON DIRECTOR OF ADULT SOCIAL SERVICES
RESPONSIBLE PORTFOLIO HOLDER:	COUNCILLOR JEFF GREEN
KEY DECISION:	NO

1.0 EXECUTIVE SUMMARY

- 1.1 This report updates the Overview and Scrutiny Committee on the progress towards establishing a local HealthWatch organisation as directed by the Health and Social Care Bill currently progressing towards Royal Assent.

2.0 BACKGROUND AND KEY ISSUES

- 2.1 A requirement of the Local Government and Public Involvement in Health Act (2007) was that Local Involvement Networks (LINKs) should be established to supercede existing Patient Forums. Each Local Authority was obliged to contract an organisation (known as a host) to establish and then support a LINK. Each Local Authority area had autonomy to decide how they wanted their LINKs to be run and the issues on which it was to focus.

In Wirral, Voluntary Community Action Wirral (VCAW) won the contract to host the Wirral LINKs and has successfully provided support and guidance for the activities of the Wirral LINKs to date. The Health and Social Care Bill (2011) makes provisions for the establishment of HealthWatch England and the transition of existing LINKs into local HealthWatch organisations. This was to have taken effect from 1 October 2012. However, a new start date of April 2013 was announced on 3 January 2012. The Act will charge Local Authorities with the duty to ensure that there is an effective and efficient local HealthWatch in their area, with functions, roles and responsibilities not currently available to LINKs.

- 2.2 The relationship between the host organisation, VCAW, and the Wirral LINKs has been very productive; all LINK members are volunteers and have been able to concentrate on the areas of interest whilst the infrastructure has been overseen by VCAW. The relationship with the Department has also functioned well, whilst not compromising the ability of LINKs to operate as an independent champion for continually improving the quality and standards of health and social care provision for the people of Wirral.

- 2.3 A criticism of the LINKs mechanisms has been that there is no national voice for all of the local networks, and this is to be addressed by the creation of a national body, HealthWatch England, which will have three core responsibilities: leadership, advice, and escalating concerns nationally. The announcement of 3 January also included £3.2m to be made available nationally for start up costs in setting up local Healthwatch. Notification of the allocation for Wirral has not been received.
- 2.4 Local HealthWatch organisations will maintain all existing LINK functions, such as their powers of 'Enter and View', and will continue to have a role in influencing the provision of local services and monitoring any concerns about services but in addition will have a seat at the Health and Wellbeing Board and take on responsibility for advocating for individuals who wish to make a complaint about healthcare.
- 2.5 The key issue for Wirral HealthWatch is the form of the organisation that will enable these functions. Although the Government's 'HealthWatch Transition Plan' states clearly that there should be an evolution from the current LINKs organisations to the new HealthWatch organisations, there is contradictory advice and guidance about how this should happen.

2.6 The organisational model of Wirral HealthWatch

- 2.6.1 Although the Government advises an evolution from the current system, under which a host supports volunteers to carry out the LINKs functions, there is a stipulation that the local HealthWatch organisation must be a 'body corporate', or legal entity, in its own right, so the host relationship must end. The Government has not provided any clear advice or guidance on what is to replace this arrangement.
- 2.6.2 A local HealthWatch Transition Group has been established, comprising members from DASS, NHS Wirral, VCAW, Wirral LINKs, Wirral University Teaching Hospital, Clatterbridge Centre for Oncology, the Community Trust and the Ambulance Trust. This group has deliberated on the best model for the delivery of the required HealthWatch outcomes and is being advised by the Borough Solicitor and guided by the work of the various Pathfinder sites. In the absence of clear Government guidance on the form of a local HealthWatch organisation, Wirral's position reflects that other Local Authorities around the region.
- 2.6.3 The Transition Group considers the following model (see attached) developed in association with Transition Alliance NorthWest (a grouping of stakeholders from Local Authorities, NHS and Public Health) as the most appropriate. In this model:
- The Transition Group (after wide consultation with stakeholders about the form and representation) co-ordinates the establishment of a Wirral HealthWatch Board, which would take the necessary steps to become the 'body corporate'.
 - This Board would appoint a Project Manager/ Chief Officer to co-ordinate the work of the volunteers who would carry out the required HealthWatch functions of signposting, influencing and complaints advocacy, as well as the necessary business support functions.

- At least two HealthWatch volunteers will be invited to sit on the Board as non-executive Directors.
- Wirral HealthWatch would be commissioned and regulated by DASS, with regular monitoring meetings in place.
- A member of the HealthWatch volunteers will have a place on the Health and Wellbeing Board.

2.6.4 Advice is being sought from the Borough Solicitor's office and Transition Alliance NW about how this model could be funded, as by definition it could not be tendered out (there can only be one body corporate known as 'Wirral HealthWatch', for example). Given that 150 Councils are likely to be in a similar position, it may be that an enabling clause will have to be introduced into the Bill.

3.0 RELEVANT RISKS

3.1 There is a risk that the new model may not function as well as the current arrangement, either because volunteers can not be identified of sufficient calibre to run the body corporate, or because of some other, unforeseen factor.

4.0 OTHER OPTIONS CONSIDERED

Mitigation of Risk

4.1 The HealthWatch Transition Plan provides a contingency measure for the Local Authority to put in place 'different arrangements if a local HealthWatch organisation is not operating effectively'. This exact nature of these 'different arrangements' would have to be discussed, but the wording does provide the opportunity for the Local Authority to intervene.

4.2 In the event of difficulties with the model, the Local Authority could discuss the issues with HealthWatch England, an option that is not currently available (nor has been needed) with Wirral LINK.

5.0 CONSULTATION

5.1 A full programme of consultation with the public and the Voluntary, Community and Faith sector about the shape and what they would expect from a Wirral HealthWatch organisation will take place in early 2012.

6.0 IMPLICATIONS FOR VOLUNTARY, COMMUNITY AND FAITH GROUPS

6.1 See 5.1 above. The transition to HealthWatch is designed to maximise the involvement and voice of people either as individuals or via the groups to which they belong.

7.0 RESOURCE IMPLICATIONS: FINANCIAL; IT; STAFFING; AND ASSETS

7.1 **FINANCIAL** – there is no envisaged change to the current funding arrangements at present but see 2.4 above about how the body corporate could be funded within current procurement arrangements.

7.2 **IT** – there are no IT implications

7.3 **STAFFING** – depending on the job description for the Project Manager, there may need to be a TUPE arrangement with the current host.

7.4 **ASSETS** – there are no asset implications arising from this report.

8.0 LEGAL IMPLICATIONS

8.1 There is a legal requirement to establish a Wirral HealthWatch as a body corporate and the Borough Solicitor's office is providing advice.

9.0 EQUALITIES IMPLICATIONS

9.1 An Equality Impact Assessment will be carried out when the shape of the HealthWatch model is clarified.

10.0 CARBON REDUCTION IMPLICATIONS

10.1 There are no implications arising directly from this report.

11.0 PLANNING AND COMMUNITY SAFETY IMPLICATIONS

11.1 There are no implications arising directly from this report.

12.0 RECOMMENDATION/S

12.1 That Committee support the Transition Group in seeking to develop the most appropriate model for a successful Wirral HealthWatch organisation.

13.0 REASON/S FOR RECOMMENDATIONS

13.1 The development of HealthWatch is a statutory requirement – therefore the support to develop a successful model is vital.

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APPENDICES

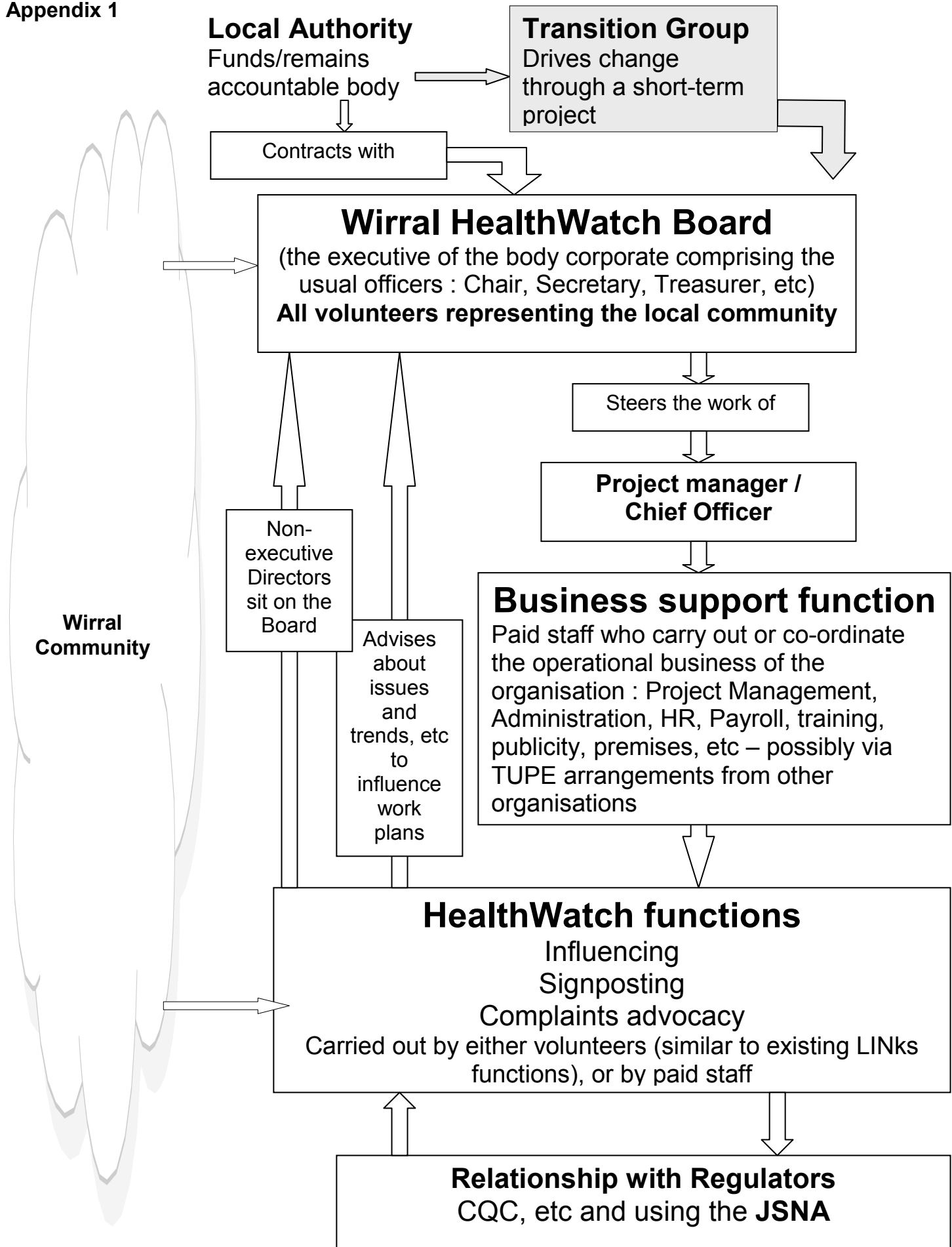
Appendix 1 - HealthWatch model flowchart

REFERENCE MATERIAL

- Health and Social Care Bill: -
<http://www.publications.parliament.uk/pa/cm201011/cmbills/177/11177.156-162.html#i555>
- HealthWatch Transition Plan, DoH March 2011: -
http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_126325.pdf
- DoH Gateway Reference 17068, 3 January 2012

SUBJECT HISTORY (last 3 years)

Council Meeting	Date
N/A	N/A



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‘Extending Engagement’

part of a placed based leadership project to develop the
Wirral Health and Wellbeing Board

21st March 2012, 12.45 pm - 4.00 pm

Wirral Education Centre, Acre Lane, Bromborough, Wirral CH62 7BZ

Introduction

Although policy makers may have used phrases like ‘no decision about you without you’ and ‘putting the patient at the centre of everything we do’ as part of their rhetoric there were those in both statutory and voluntary sectors with a real commitment to engaging the public and to amplifying the voices of users, carers and citizens in the debate about how health and social care service are run. However no matter how successful their efforts it is imperative that in the future we will need to make radical improvements in the way we relate to the users, patients and the public.

Of course, better engagement is a core principle of the Government's NHS reforms and many will be held to account for making it happen. The creation of **HealthWatch** will also require some careful thought if the new is to build on and not compete with the old. But there is perhaps a more pressing reason to devote some time to thinking about how to extend the reach and quality of public engagement. To deliver the savings required of public services *and* maintain quality, there will have to be fundamental changes in the configuration and utilisation of services made at an unprecedented speed. Unless we find new ways of communicating with the public about the need for changes and of involving them directly in decisions about them, life for commissioners and providers of health and social care on the Wirral – not to mention public representatives - will become extremely difficult.

On the Wirral there have been some real achievements in reaching out to the public – and there has been some experimentation with new methodologies. What the **Extending Engagement** workshop will do is to enable all those concerned with engagement and communications from across the health and social care system to come together and review what has been achieved thus far, consider the scale of the challenge that they face, think about new approaches and methodologies and then come to a shared understanding about how best the public might be brought into the heart of decision making on the Wirral. These ideas will become the basis for proposals to the **Wirral Health and Wellbeing Board**.

It should be a challenging and interesting session which will have a strong influence on the way we conduct engagement on the Wirral in the future – join us!

Annette Roberts

Lead, Extending Engagement Project
Health

Fiona Johnstone

Director of Public

21st March 2012, 12.45 pm - 4.00 pm

Wirral Education Centre, Acre Lane, Bromborough, Wirral CH62 7BZ

Programme

12.45 **Arrival and Coffee**

1.00 **Introduction** – Annette Roberts

1.10 **Health and Wellbeing Boards : The National and Local Context** Fiona Johnstone

1.30 **Explanation of the Process** Laurie McMahon

1.40 **What we tried and what we have learnt Part A** – Small Learning Sets
(refreshments)

2.15 **What we tried and what we have learnt Part B** – Facilitated Plenary

2.45 **Using new media to extend reach, spread and impact.**

Edward Gamble, Director *ChoiceNet*

3.30 **Extending Engagement for Wirral** – plenary discussion

4.00 **Programme Close**



Living Well in Wirral's Communities

A place based leadership initiative

Tuesday 20 March, Palace Room, Floral Pavilion, New Brighton
CH45 2JS

The purpose of this event is to explore how the new public health thinking about integrated wellness services can be delivered across Wirral.

9.30 Arrival and networking

10.00 Introduction to the Living Well Concept Fiona Johnstone and Jude Stanfield

Fiona and Jude will explain the North West's call to action for a new dimension to public health, focusing on individual wellness. They will also set out the factors that need to be taken into account in its development and delivery in the Wirral.

10.40 Places and People: developing the concept

To help us expand the Living Well approach we will consider how it might work for different types of citizens and families, using a set of personal health and life stories

11.20 Break

11.30 Refining the Living Well proposal

Building on the outputs from the previous session we will aim to produce a 'mock up' of how the emerging ideas might be applied to two contrasting communities in the Wirral.

12.30 Lunch

1.15 Mobilising the community

Here we will focus on how community assets can be stimulated and mobilised and what can be done to establish a new balance between them and statutory health and care services.

1.40 Making the Living Well programme real

Here we will consider the key changes that would need to be made by statutory services and others to shift from the current pattern of support to the future picture.

2.15 Establishing the action plan

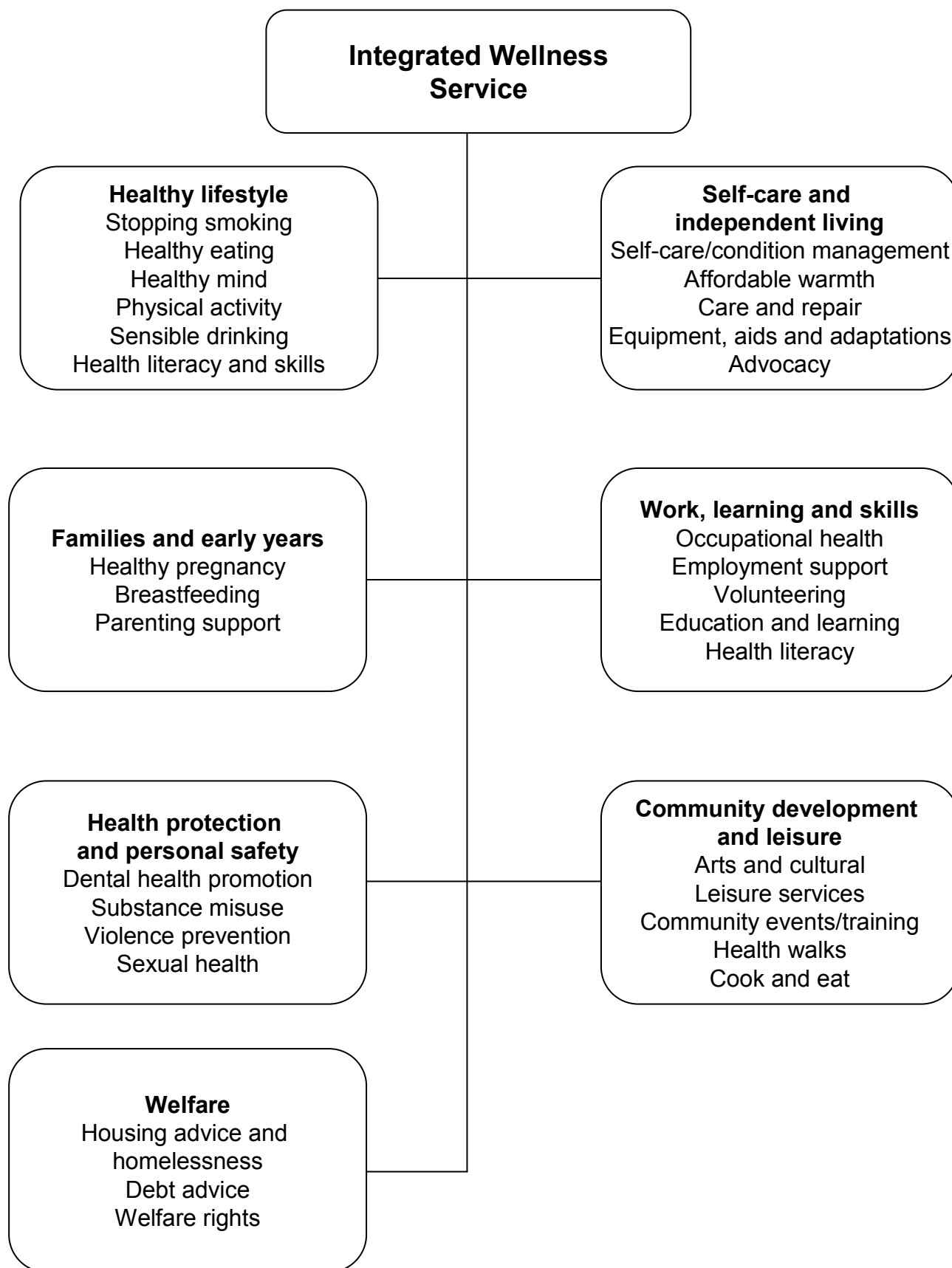


In this session we will start by considering what would be a realistic set of achievements within one year of the Living Well programme. We will then identify the immediate next steps that need to be taken and by whom to start moving the programme forward.

2.50 Key messages from today

We will draw together the conclusions and recommendations today and consider how they will be presented and shared with different stakeholders

3.00 Meeting ends



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WIRRAL SHADOW HEALTH & WELLBEING BOARD

Meeting Date	14 March 2012	Agenda Item	
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Report Title	Draft Child Poverty Strategy and Action Plan
Responsible Board Member	Jim Wilkie

Link To Shadow HWB Function	Board development						
	JSNA/JHWS						
	Health and social care integrated commissioning or provision						
	To consider how best the Shadow Health & Wellbeing Board can work with the Local Strategic Partnership and ensure that the relationship is productive and does not duplicate activity (Terms of Reference, point 10)			✓			
Equality Impact Assessment Required & Attached		Yes		No		N/A	✓
Purpose	For approval		To note	✓		To assure	

Summary of Paper	Wirral is producing a Child Poverty Strategy and Action Plan. This paper presents key milestones in developing the draft strategy and action plan to date.		
Financial Implications	Total financial implication	New investment required	Source of investment (e.g. name of budget)
	£ -	£ -	£ -
Risks and Preventive Measures	The development of a risk register for the child poverty and action plan will be included as part of performance management and governance arrangements. Failure to develop and implement a child poverty strategy and action plan will expose the Council to risk of challenge for failing to discharge a statutory duty.		
Details of Any Public/Patient/Service User Engagement	To support the development of the draft strategy and action plan, the local authority established a local advisory group to review the evidence and make recommendations to the Council and its partners about local action to tackle child poverty. Representation on this group (the Wirral Child and Family Poverty Working Group) is drawn from the local authority, voluntary, community and faith, housing, health (including the Director of Public Health), and education, employment and skills sectors.		
Recommendations/Next Steps	Board Members are requested to note the report.		

Report History		
Submitted to:	Date:	Summary of outcome:
<i>The information in this paper has been submitted to a number of Council Committees and partnership meetings for noting and comments</i>		
List of Appendices	Appendix 1 Draft Child Poverty Strategy	

Publish On Website	Yes	✓	Private Business	Yes	
	No			No	✓

Report Author: Jane Morgan, Wirral Council

Contact details: janemorgan@wirral.gov.uk; 0151 691 8140

Draft Child Poverty Strategy and Action Plan

Background

Wirral is producing a Child Poverty Strategy and Action Plan. To support this, the local authority established a local advisory group to review the evidence and make recommendations to the Council and its partners about local action to tackle child poverty. Representation on this group (the Wirral Child and Family Poverty Working Group) is drawn from the local authority, voluntary, community and faith, housing, health (including the Director of Public Health), and education, employment and skills sectors.

Milestones regarding the development of the strategy and action plan are as follows:

- The discussions of the Working Group, and wider consultation with partners, have informed the development of the draft 'Roots and Wings' strategy and action plan which is set out at **Appendix 1**. Central to these discussions have been the need for all partners to work with each other to add value to existing provision and the need to utilise the positive assets of local communities in raising the aspirations of children and families.
- This draft strategy and action plan has been approved by Wirral Council Cabinet and further consultation and a work is ongoing to produce a final version in consultation with partners. Comments on any aspect of the draft are welcomed.
- Work is also underway to develop a new Children and Young People's Plan (CYPP) for 2012-13 overseen by the Children's Trust Executive. Through this process projects and activities are being developed related to the child poverty agenda. These key projects will be included in the action plan.
- The consultation to develop Neighbourhood Plans for Wirral's Area Forum areas which took place at the end of last year questions which will supplement evidence about child poverty issues and inform actions in the final strategy and plan. The information will help us to better understand the services and characteristics local neighbourhoods should have in terms of successfully supporting family life and addressing issues of poverty within communities.
- The Council's budget for 2011-12 included £10,000 to support targeted engagement in respect of developing the strategy. A project has been commissioned to evaluate the impact of existing local initiatives and programmes on families in poverty with a particular focus on identifying what interventions have been most successful in supporting parents into sustainable employment. The outcomes of this evaluation will be circulated widely to all partners and used to inform the development of action
- Once the plan is finalised, clear governance arrangements will need to be in place to ensure that the strategy and action plan are delivered effectively and that links continue to be made with key partnership plans and activity. Work is underway to develop these governance arrangements in line with the review of the Local Strategic Partnership.

- Development work is also underway regarding a performance framework for monitoring outcomes achieved from the delivery of the action plan.
- The work to develop Wirral's strategy and action plan is closely aligned with the Liverpool City Region (LCR) child poverty and life chances strategy, which has now been launched and is available at www.liverpoolcitystrategyces.org.uk
- The Children's Trust agreed that the child poverty training module be compulsory for all staff and volunteers working with children and young people. The development of the module is almost complete and will be added to the Children's Workforce common induction programme to ensure all staff are trained in this area. An e-learning module is also planned.
- Under the 'roots and wings' banner, pilot work is underway regarding approaches to supporting teenage mothers from conception onwards.

Appendix 1 – Draft Child Poverty Strategy and Action Plan



ROOTS & WINGS

BUILDING FOUNDATIONS, ACHIEVING DREAMS

OUR VISION

As partners in the future of Wirral, we will work together to reduce the numbers of children and young people living in poverty and support them to build the foundations for prosperous, healthy and happy lives. We will also work together to raise the aspirations of all of our children and young people and their families so that their dreams for themselves and their communities can be achieved.

We are clear that the best way to achieve this vision is through:

- Ensuring that children and families can easily access the services they need and that partners work together to provide more joined up approaches to eliminating poverty and deprivation;
- Targeting our efforts to make work the best route out of poverty for Wirral families;
- Providing effective support for Wirral families who need help to manage debt or issues of financial exclusion;
- Maximising the impact of all we do to improve the life chances of Wirral's children;
- Recognising and supporting the role that safe and high quality neighbourhoods and thriving communities can have in transforming lives.

We will not be complacent about this vision. We will challenge ourselves and each other to maintain a clear focus on working together and taking practical action to achieve our common goals of reducing poverty and harnessing the talent and ambitions of Wirral's children, families and communities. *We want everyone in Wirral to sign up to our vision; you can do this at www.wirral.gov.uk/rootsandwings*

If I had two wishes, I know what they would be
I'd wish for Roots to cling to, and Wings to set me free;

Roots of inner values, like rings within a tree, and Wings of independence to seek my destiny.

Roots to hold forever to keep me safe and strong,
To let me know you love me, when I've done something wrong;

To show me by example, and help me learn to choose,
To take those actions every day to win instead of lose.

Just be there when I need you, to tell me it's all right,
To face my fear of falling when I test my wings in flight;

Don't make my life too easy, it's better if I try,
And fail and get back up myself, so I can learn to fly.

If I had two wishes, to make my dreams come true,
And they could just be granted, by someone such as you;

I wouldn't ask for money or any shop-bought things,
The greatest gifts I'd ask for are simply Roots and Wings.

(inspired by A Child's Bedtime Song taken from Denis Waitley's *Excerpts From the Seeds of Greatness Treasury*)

CONTENTS

1. POLICY BACKGROUND

2. UNDERSTANDING CHILD POVERTY

3. TAKING ACTION IN WIRRAL

4. WORKSTREAMS

- 4.1 Ensuring that children and families can easily access the services they need and that partners work together to provide more joined up approaches to recognising and addressing poverty
- 4.2 Targeting our efforts to make work the best route out of poverty for Wirral families
- 4.3 Providing effective support for Wirral families who need help to manage debt or issues of financial inclusion
- 4.4 Maximising the impact of all we do to improve the life chances of Wirral's children and young people
- 4.5 Recognising and supporting the role that safe and high quality neighbourhoods and thriving communities can have in transforming lives.

1. **POLICY BACKGROUND**

The development of Wirral's child and family poverty strategy is set against a policy background of key legislation, independent reviews and national and sub-regional strategies. These are described in the following pages.

Child Poverty Act 2010

The Child Poverty Act 2010 sets the ambition to end child poverty by 2020, and highlights the associated national and local actions required. The commitment to end child poverty was maintained by the Coalition Government elected in May 2010. The Coalition Programme for Government included a number of initiatives related to the eradication of child poverty, including intentions to reform the tax credit system; free early education for disadvantaged 2 year olds; re-focusing of Sure Start on the neediest families and; re-focusing of Sure Start funding for outreach services to increase the number of Sure Start Health Visitors. Advisory guidance was published by the Child Poverty Unit in September 2010 to support local authorities in carrying out their duties. This covers the key areas of the duty to cooperate, to understand local needs, and to develop and deliver a strategy.

Independent Review on Poverty and Life Chances, led by Frank Field MP

In December 2010, the Independent Review on Poverty and Life Chances led by Frank Field MP, produced the report 'The Foundation Years: preventing poor children becoming poor adults'. That report emphasised that:

"We have found overwhelming evidence that children's life chances are most heavily predicated on their development in the first five years of life. It is family background, parental education, good parenting and the opportunities for learning and development in those crucial years that together matter more to children than money, in determining whether their potential is realised in adult life. The things that matter most are a healthy pregnancy; good maternal mental health; secure bonding with the child; love and responsiveness of parents along with clear boundaries, as well as opportunities for a child's cognitive, language and social and emotional development. Good services matter too: health services, Children's Centres and high quality childcare. Later interventions to help poorly performing children can be effective but, in general, the most effective and cost-effective way to help and support young families is in the earliest years of a child's life".

Independent Review on Early Intervention, led by Graham Allen

In July 2010, the Government announced the setting up of an independent commission on early intervention to be chaired by Graham Allen, MP for Nottingham North. An initial report, 'Early Intervention: The Next Steps', setting out the rationale for early intervention, was published in January 2011. A second report, published in June 2011, detailed the new funding options needed to resource early intervention. In the context of the Allen report, the term 'Early Intervention' is used to refer to the general approaches, plus specific policies and programmes, which help to give children aged 0 to 3 years, the

social and emotional foundation they need to reach their full potential, and to those which help older children become the good parents of tomorrow.

In the 'Early Intervention: The Next Steps' report, Graham Allen comments that:

"There are now two competing cultures: the dominant one – of late intervention – and the growing one – of Early Intervention. It is not an either/or – we must continue to swat the mosquitoes but we can drain the swamp too. The bleak truth is that decades of expensive late intervention have failed. Major social problems have got worse not better: despite heroic frontline efforts tackling the symptoms, their causes often remain unaddressed".

A second report from Graham Allen, titled 'Early Intervention: Smart Investment, Massive Savings' sets out how we can pay for those programmes within existing resources and by attracting new non government money. The report argues that:

Early Intervention investment has the potential to make massive savings in public expenditure, reduce the costs of educational underachievement, drink and drug abuse, teenage pregnancy, vandalism and criminality, court and police costs, academic underachievement, lack of aspiration to work and the bills from lifetimes wasted while claiming benefits.

Review of Early Years Foundation Stage – Dame Claire Tickell

In July 2010, the Government asked Dame Clare Tickell to carry out an independent review of the Early Years Foundation Stage (EYFS) to consider how this could be less bureaucratic and more focused on supporting children's early learning. The Foundation Years refers to a child's earliest years in life, from pregnancy to age five.

The report concluded that particular attention should be given to ensuring that children who have specific needs, or come from particularly disadvantaged backgrounds, are identified and supported as early as possible, given the overwhelming evidence of the positive impact that this has. Ensuring a close working relationship between those people in health, early years and education alongside parents and carers is an absolute pre-requisite to this. The Tickell report added that more needs to be done to "oil the wheels of multi-agency working, particularly for children who need additional support".

Fair Society, Healthy Lives – Sir Michael Marmot

In November 2008, Professor Sir Michael Marmot was asked by the Secretary of State for Health to chair an independent review to propose the most effective evidence-based strategies for reducing health inequalities in England from 2010. The review concluded:

"People with higher socioeconomic position in society have a greater array of life chances and more opportunities to lead a flourishing life. They also have better health. The two are linked: the more favoured people are, socially and economically, the better their health".

The Marmot review determined that reducing health inequalities will require action on six policy objectives:

- Give every child the best start in life
- Enable all children, young people and adults to maximise their capabilities and have control over their lives
- Create fair employment and good work for all
- Ensure healthy standard of living for all
- Create and develop healthy and sustainable places and communities
- Strengthen the role and impact of ill health prevention

The National Strategy

Further to the findings of the national reviews led by Frank Field MP and Graham Allen MP, the Government launched a new strategy document in 2011 - 'A New Approach to Child Poverty: Tackling the Causes of Disadvantage and Transforming Families' Lives'. The strategy was released at the same time as the Government's Social Mobility Strategy, "Opening Doors, Breaking Barriers: A strategy for Social Mobility". The Government argues that increasing social mobility and achieving social justice will ultimately contribute towards success in ending child poverty.

This is the Government's first national Child Poverty Strategy, setting out a new approach to tackling poverty for this Parliament and up to 2020. Central to the strategy are:

- Strengthening families
- Encouraging responsibility
- Promoting work
- Guaranteeing fairness
- Providing support to the most vulnerable

The government argues that income measures and targets do not tell the full story. "Our radical programme of reform to deliver social justice will focus on combating worklessness and educational failure and preventing family and relationship breakdown with the aim of supporting the most disadvantaged groups struggling at the bottom of society".

Addressing the root causes of poverty and not just the symptoms means recognising the importance of the context in which a child is raised, alongside factors including education and income. Therefore, there is a focus on strong families, relationships and parenting support.

The government will measure the success of this approach to tackling child poverty through a new set of indicators.

There are still many complexities within this approach and the new national strategy recognises that more needs to be done to identify extreme poverty.

Liverpool City Region Child Poverty and Life Chances Strategy 2011 – 2014 (currently being considered through City Region governance arrangements)

The work being undertaken by Wirral is linked to a wider Liverpool City Region approach. The Liverpool City region Child Poverty and Life Chances Commission, also chaired by Frank Field MP, was established to lead activity across the region and has driven the development of the Liverpool City Region Strategy which has two broad aims. These are underpinned by seven strategic actions and are the areas that the Commission will focus its efforts on during the life of this strategy (2011-14).

Aim 1: Ensure the best possible start in life for children and young people to improve their life chances

Actions

1. Support effective parenting and drive improvements in foundation years services
2. Enhance children's social and emotional development and reduce gaps in educational achievement
3. Promote prevention and early intervention approaches to reduce health inequalities
4. Improve the quality of places and support strong communities to minimise the impact of disadvantage

Aim 2: Maximise Family Income

Actions

1. Improve access to suitable financial services and support families to make good financial decisions
2. Optimise employment opportunities by removing barriers to good quality and sustainable employment
3. Support parents to progress in work

The long-term Liverpool City Region approach that will be delivered through three strategies up to 2020 – coinciding with the National Child Poverty Strategy target date to eradicate child poverty.

2. UNDERSTANDING CHILD AND FAMILY POVERTY

There is extensive debate about the way in which child poverty is measured; however, the use of household income to measure poverty is the most universally accepted method and provides us with statistics about levels of child poverty in the UK, the Liverpool City Region and Wirral.

Child Poverty in the UK

The UK has one of the worst rates of child poverty in the industrialised world.

Nearly 4 million children are living in poverty in the UK (after housing costs).

The proportion of children living in poverty grew from 1 in 10 in 1979 to 1 in 3 in 1998. Today, 30 per cent of children in Britain are living in poverty.

It is estimated that 1.9 million children live in workless households.

Source: End Child Poverty website

Child Poverty in the Liverpool City Region

The Liverpool City Region is home to 1.5 million people, which includes around 327,000 children in 191,000 families. The City Region comprises the boroughs of Halton, Knowsley, Sefton, St. Helens, Wirral and the City of Liverpool. Together these districts make up a functional economic area with approximately 90% of all residents both living and working in the City Region.

Around 90,000 children in the Liverpool City Region are growing up in poverty.

The majority of children in poverty in the City Region live in lone parent families (77%)

Most children living in poverty in the City Region live in households claiming Income Support (IS) or Job Seekers Allowance (JSA); the City Region has a higher proportion of lone parent families on IS / JSA benefit than England.

Over 85% of City Region children living in poverty are under 16 years of age, and nearly 60% are under 11.

All local authority areas in the City Region, including Wirral, have severe concentrations of child poverty.

Source: Draft LCR Poverty and Life Chances Strategy

Child Poverty in Wirral

24.2% of children in Wirral are living in poverty – around 17,000 of our children and young people

Nearly 15,000 of these children and young people are under 16

The overall statistics mask huge differences in child poverty within the borough – a number of wealthier areas in Wirral have very low – or no – rates of child poverty whilst in some areas the levels can be as high as 72% of children under 16 living in poverty

Free School Meals data is an important and up-to-date method of identifying children and young people from low income families - the percentage of pupils who are eligible for Free School Meals in Wirral primary schools is greater than both national and North West averages

Which areas are most affected by child poverty in Wirral?

The tables below compare the neighbourhoods and communities with the highest and lowest percentages of children under 16 living in poverty. This demonstrates the stark differences in different parts of Wirral. Wirral has 11 Area Forums, which represent groups of electoral wards. The Area Forum areas most affected by child poverty, as indicated in the tables below, are Bidston & Claughton, Birkenhead, Tranmere & Rock Ferry, Liscard and Seacombe, and Leasowe, Moreton & Saughall Massie.

Highest			Lowest		
Community / Neighbourhood	Area Forum	% children	Community / Neighbourhood	Area Forum	% children
Ilchester Road	Bidston & Claughton	72.2%	The Beacons	Heswall, Pensby & Thingwall	1.8%
Mayor Road	Bidston & Claughton	69.9%	Wirral Country Park	Heswall, Pensby & Thingwall	1.7%
Paterson Street	Birkenhead, Tranmere & Rock Ferry	63.9%	Davenport Road	Heswall, Pensby & Thingwall	1.7%
Leasowe Sports Centre	Leasowe, Moreton & Saughall Massie	63.8%	Bertram Drive	West Wirral	1.7%
Seacombe Ferry	Liscard & Seacombe	63.8%	Dawpool Drive	Bromborough and Eastham	1.6%
St Catherines Hospital	Birkenhead, Tranmere & Rock Ferry	62.4%	Cawfield Drive	Greasby, Frankby, Irby, Upton & Woodchurch	1.6%
Harrogate Road	Birkenhead, Tranmere &	62.3%	Whitfield Common	Heswall, Pensby &	1.5%

	Rock Ferry			Thingwall	
Bidston Moss	Bidston & Claughton	62.0%	Huwell Drive	Greasby, Frankby, Irby, Upton & Woodchurch	1.5%
Graving Docks	Bidston & Claughton	61.6%	Langdale Road	Bebington & Clatterbridge	1.3%
Expressway Business Park	Birkenhead, Tranmere & Rock Ferry	61.6%	Upland Road	Greasby, Frankby, Irby, Upton & Woodchurch	1.3%
Union Street	Liscard & Seacombe	59.2%	Heswall Golf Course	Heswall, Pensby & Thingwall	0.0%
Victoria Fields	Birkenhead, Tranmere & Rock Ferry	58.1%	Wirral Country Park	Greasby, Frankby, Irby, Upton & Woodchurch	0.0%

Source: HMRC, NI116, August 2008

Which groups of children and families are most affected?

Wirral is amongst the ten most deprived areas for employment in the country. Children whose parents are among the long-term unemployed are more likely to be affected by poverty and, in the east of the borough, there are concentrations of long-term unemployment and low skills in some of the most disadvantaged communities in England.

A related issue for Wirral is the fact that there is a significant minority (9%) of Wirral's young people who are not in education, employment and training. Despite year on year reductions in this group, which have been achieved in light of the recession, numbers are still too high. Young people from disadvantaged areas and vulnerable groups, including those with learning difficulties and disabilities and looked after children, are disproportionately represented.

Many socially-excluded children can become involved in offending and anti-social behaviour very early in their lives and the positive or negative experiences they have around the age of 12 can have a long-lasting impact on their later life chances. Studies show that there is a link between low income, social isolation and youth offending.

Children in one parent families are more likely to be affected by poverty. The communities and neighbourhoods with the highest number of lone parent benefit claimants are to be found in the Bidston and Claughton Area Forum area.

Whilst Wirral's teenage conception rate has declined in line with the national average, teenage pregnancy is still an issue for Wirral not least because of the often complex factors that can be involved and the likelihood that the children of teenage parents will be affected by poverty. Between 1998 and 2008, Wirral achieved a 21% reduction in the teenage conception rate (in 2008 the rate was 40.1 conceptions for every 1,000 women

aged between 15-17 years). In 2009, however, conception rates in Wirral increased to 44.0 per 1,000 women aged 15-17 years.

Young parents represent 12.2% of the total numbers of young people not in education, employment and training. 11.6% of mothers aged below 20 take up 'Care to Learn' funding to cover childcare costs to return to education or training. This is used as a marker to identify how well areas are engaging with young parents. Wirral is performing less well than the Merseyside (12.22%) and North West (17.7%) averages.

The recently launched national strategy estimates that, nationally, the proportion of children in relative poverty is significantly higher in families where at least one member is disabled than families where no one is disabled. Wirral has higher than the regional and national averages of working age adults who are disabled according to data from the Annual Population Survey (March 2010). 21.9% of the working age population is disabled. This indicates that addressing the impact of poverty on children in families where a parent is disabled is an issue for Wirral. The consultation undertaken with partners and practitioners to inform the development of the Wirral strategy suggests that we need to do more to understand the impact of poverty on children in families with a member who has learning disabilities or mental health issues.

Children with disabilities are more likely to be affected by poverty. In Wirral, Broadly 22% (16,800) children at any one time will have additional needs which require some extra support through targeted services; these may be individual or multi-agency services. These services support groups of children and their families such as those with special educational needs or disability or those requiring parenting support. A high proportion of these children will be living in the more disadvantaged areas. Within this group of 16,800 approximately 2,300 children have more complex needs which require a high level of specialist support.

The consultation also highlighted that young people leaving care in Wirral are more likely to experience issues of poverty – this reflects the evidence about these young people's attainment. Although at Key Stage 2 young people in care in Wirral do better than national comparator figures, they do less well than the Wirral average and at Key Stage 4 the attainment gap between looked after children and other pupils has increased in recent years.

Wirral has a relatively small but increasing minority of families from other cultures. More needs to be done to understand how issues of poverty might be impacting on these families.

Domestic violence is of particular concern in respect of children and families, an issue which has been highlighted in the consultation to date. There is a high incidence of violence to young women aged 16-25 who are pregnant. A significant number of people accessing the services offered by the Family Safety Unit as a result of domestic violence have chronic drug or alcohol dependencies or mental health issues and they are also likely to face economic hardship.

3. TAKING ACTION IN WIRRAL

Developing our strategy and action plan

We know that, beyond what the child poverty statistics tell us about levels of income, living in poverty is not just about struggling to make ends meet. Its impact differs from one family to another. What we also know is that children in poverty are more likely to do less well in school, to have poor employment prospects and poor health in later life. And when they have children of their own, these outcomes are likely to continue.

The data shows us that child poverty in Wirral is linked to a wide range of deprivation issues – amongst them worklessness, poor housing, poor health and low levels of educational attainment and skills. There can also be other issues such as domestic violence, abuse or neglect, child or parental illness or disability, socially unacceptable or criminal behaviour, drug or alcohol use and family dysfunction. Referrals to the local authority regarding children in need in Wirral are highest from those deprived areas that are most affected by child poverty. Tackling poverty in Wirral therefore means addressing a range of complex problems within families and communities.

We have taken a number of steps to develop a meaningful strategy and action plan to address child and family poverty in Wirral which takes into account the range of issues and services which are involved.

Firstly, we set out its extent and nature in our first Wirral Child and Family Poverty Needs Assessment. This is in line with the statutory requirements set out in the Child Poverty Act. The needs assessment sets out detailed information about the local population and the range of issues which can influence deprivation and poverty. It draws on the Joint Strategic Needs Assessment developed by NHS Wirral.

The statistics referred to throughout this report are based on the data in the needs assessment, which will be updated on a regular basis.

At the outset of developing the strategy, it was recognised that the data was only part of the story about child poverty in Wirral. Alongside this, we needed to understand what activity is already making a difference locally and what is already being considered in terms of future services by partners in Wirral.

Much has been done nationally and at the Liverpool City Region level to understand different levels of poverty and the impact of poverty on family life and the achievement and aspirations of children and young people. This understanding has informed the debate in Wirral about the action we should take.

Wirral has a strong tradition of effective partnership working. For example, the Children's Trust arrangement in Wirral is already involved in actions to improve outcomes for the most vulnerable children through improving universal provision and delivering targeted programmes, many of which benefit those living in or at risk of poverty. Wirral's Economic Development and Skills Partnership focuses on maximising employment and skills outcomes for local people and has also had clear results.

Wirral also recognises the important role that is played by the voluntary, community and faith sector in contributing to better outcomes for children and families across Wirral. In recognition of this, and the need to harness and build on existing strengths in a challenging financial climate, the local authority established an independent advisory forum to look at child poverty and to make recommendations about a local strategy. This forum is called the Wirral Child and Family Poverty Working Group.

A consultation event took place at the Floral Pavilion, New Brighton in June 2011 to engage the views of approximately 100 stakeholders from the community, voluntary and faith sector as well as the public sector. Those views have supported the development of this draft strategy.

A project is being commissioned specifically to recruit a cohort of families in Wirral who have been supported through specific employability programmes. A series of interviews will be undertaken with these families. The focus of this evaluation project will be to gather information about barriers to employment and what works best in supporting families.

Gathering information to support our child poverty strategy is also central to the neighbourhood planning process currently being undertaken in Wirral. Local communities are being asked to tell us what they want for their neighbourhoods, with targeted questions linked to issues such as access to employment and training advice and services for children and young people.

Our approach – increasing the impact of what we do

Our vision sets out what we believe should be the workstreams for tackling child poverty in Wirral. These are:

1. **Ensuring that children and families can easily access the services they need and that partners work together to provide more joined up approaches to recognising and addressing poverty;**
2. **Targeting our efforts to make work the best route out of poverty for Wirral families;**
3. **Providing effective support for Wirral families who need help to manage debt or problems of financial exclusion;**
4. **Maximising the impact of all we do to improve the life chances of Wirral's children and young people;**
5. **Recognise and support the role that safe and high quality neighbourhoods and thriving communities can have in transforming lives.**

Through the discussions undertaken by Wirral's Child and Family Poverty Working Group and consultation on the issues, we already know that there is much good practice in place supporting families in poverty or at risk of poverty. The consultation has also

told us that we could do better in terms of the way we work together as partners on these agendas in Wirral to increase the impact of what we do on reducing child poverty.

A key principle for working in partnership has developed from the work undertaken in Wirral to develop the strategy and action plan. This is the need to use the language of aspiration and hope when we talk about our children, families and communities in Wirral.

The initial action plan at the end of this document sets what we will now do to take forward the key issues and challenges we have identified through looking at the evidence and talking to partners and local people. All of the actions we will take as part of this strategy will be driven by the need to make an impact in and to add value to our local strategies for investment, jobs and skills and our plans for Wirral's children and young people and local neighbourhoods.

The national target date for eradicating child poverty is 2020 – this strategy and action plan is the starting point for ensuring that the Council, partners and the wider community work together in every way possible to achieve this in Wirral.

The Council's role

The Council has a duty to facilitate the delivery of Wirral's strategy through supporting partners to work together and helping innovation to thrive. In recognition of this leadership role, the Council will:

- Ensure that measures to tackle child poverty are central to its budget, corporate planning and commissioning activities, both the services that we commission and where we join up our budgets with others;
- Support the development of local approaches to working with our most vulnerable families over and above the services we already commission for children and families, led by the voluntary, community and faith sector;
- Pursue opportunities such as the use of Community Budgets to drive more effective allocation of our resources in line with the needs of families and local communities;
- Put in place clear monitoring and reporting processes to evaluate the impact of our action plan.

4. WORKSTREAMS

Workstream 1: Ensuring that children and families can easily access the services they need and that partners work together to provide more joined up approaches to recognising and addressing poverty

Partnership working in Wirral to improve outcomes for children and young people is recognised as being of an extremely high standard.

A clear finding of the consultation in relation to issues of child and family poverty is that partners in Wirral can do more to join up the provision of advice and support and ensure that those working at the front line of services, whether this is in Council or partner facilities or in community and voluntary organisations, have the knowledge they need to effectively support and signpost families to the services they need.

Workstream 2: Targeting our efforts to make work the best route out of poverty for Wirral families

The evidence in Wirral, including what we have learnt through consulting with partners, families and children and local communities, tells us that we can do more to break down barriers to employment and training to make work the best route out of poverty and that for different target groups and individuals these barriers may be very different.

There can be specific barriers to employment for particular target groups, including lone parents, people with mental health issues and/or disabilities, young offenders, people who do not engage, homeless / rough sleepers, people with alcohol / drug dependency, ethnic minority communities, deprived communities, young people not in education, employment or training (NEET) and young people who have been looked after children. Data demonstrates that employment rates for these groups are lower than the average.

Evidence suggests a particular barrier to employment for adults and young people in target groups is not being 'workplace ready' when they enter employment or work-based training opportunities – this can include, for example, lack of basic numeracy or literacy skills.

A key barrier – actual or perceived – is childcare. Partners need to explore further issues of access and affordability to ensure that flexible and safe provision is developed to meet the needs of families as well as taking practical action to promote the value of childcare as a realistic option for working parents.

For some parents, the high costs of transport plus the availability and reliability of public transport can become prohibitive particularly for those in low-paid jobs. Low travel horizons, i.e. a reluctance to travel to employment and training opportunities, can also be particularly common in some deprived communities.

There is also a perception that there is a shortage of work that is particularly suitable to some parents, for example, part-time jobs fitting around nursery or school hours; term-time employment; and jobs providing more than very limited financial gains.

Many parents who do work are trapped in a cycle of low skills, low-paid employment with limited career prospects and increased chances of moving between benefits and work. Supporting parents to progress in work is identified as a key area for lobbying and action in the Liverpool City Region Strategy.

Workstream 3: Providing effective support for Wirral families who need help to manage debt or problems of financial exclusion

We know that many people on Wirral, especially those on low incomes and in the most deprived areas, do not have access to some financial products and that lack of a bank account or affordable credit puts people in some areas at greater risk of having to turn to 'loan sharks' and other unregulated lending provision.

We also know that families in Wirral are experiencing 'over-indebtedness' or problem debt that is not manageable in relation to their income and that these individuals tend to be concentrated at the lower end of the income scale.

The Government's definition of fuel poverty is when a household needs to spend more than 10% of its disposable income to adequately heat their home. 17.1% of Wirral households are currently estimated to be in fuel poverty, which although is below the average for both the Liverpool City Region (18.3%) and the North West (18.1%) it is higher than the national average for England (15.6%). The majority of households living in fuel poverty tend to be living in areas where income is low and property standards are poor. Due to the economic climate and rising energy costs, fuel poverty is again reportedly increasing.

Workstream 4: Maximising the impact of all we do to improve the life chances of Wirral's children and young people

Access to high quality early years provision including schools, maintained, private, voluntary and independent settings and provision of services through Sure Start Children's Centres can provide children with a strong foundation for future development. Support for families in parenting and other programmes can also impact on life chances for individual children.

We also know that involvement of some parents in supporting their children is sometimes inconsistent. Some have low aspirations. Such parents often fail to engage with services which will enable the development of their child. As a consequence, there is an outcome of children facing a poverty of experience.

Language rich environments are crucial for a child's ability to communicate effectively and develop their social and emotional capabilities to their full potential. Research has demonstrated that approximately 50% of children in socially disadvantaged areas have significant language delay on entry to school. These children are more likely to have poor employment prospects and develop mental health issues later in life.

The most damaging factors to a young child's emotional and social development include: poor maternal mental health; harsh and inconsistent parenting, the lack of good quality play and learning experiences and parents with learning difficulties. In some

communities and families, the issue of poor parenting is multi-generational. The consultation undertaken in Wirral also suggests however that the impact of older family members playing a significant role in parenting can be extremely positive.

Successful progress has been made in the Early Years Foundation Stage with continuous improvement, including in the lowest achieving children. Children eligible for free school meals and those living in the 3% most deprived areas of Wirral have improved their attainment at a higher rate than the rest of the Wirral. However, areas with the highest levels of deprivation continue to have lower attainment than areas with the lowest levels of deprivation.

The gap in attainment between children eligible for a free school meal and those who are not increases as children progress through their education in Wirral. Overall, the attainment of Wirral pupils is often above the national averages but there is a significant difference or 'gap' between attainment in the most affluent areas and the most deprived. The latest data demonstrates that, whilst the gap between Free School Meal and non-Free School Meal pupils in the attainment of 5+ A*-C GCSE is narrowing each year, it is still higher than the national gap or that found in similar areas to Wirral.

The latest data available about young people in Wirral from low income backgrounds who have progressed to higher education in comparison to their peers shows that the gap continues, one which is greater than can be found nationally. By age 19, the gap in the attainment of a Level 3 qualification is 31.8%, greater than the national gap and the largest gap of all the Liverpool City Region authorities.

Health inequalities manifest themselves from the start of life and are linked to other factors of poverty and deprivation. Mothers in deprived areas of Wirral are more likely to smoke in pregnancy and have low birth weight babies. They are also less likely to breastfeed their babies and more likely to suffer from post-natal depression. Children with lower birth weight have been shown to have poorer health and poorer cognitive development at ages 3 and 5. There is a strong correlation between a mother's level of education and her children's health. There are differences in obesity levels between children aged 2 to 15 in rich and poor families.

There is an increasing recognition of the benefits of early intervention programmes, the intention of which is to support a focus on preventative services in the early years and beyond. A particularly important issue is the identification of families who fail to access existing services. The national focus has been set by the development of the Early Intervention Grant, a specific funding stream, which will run from 2011 until 2015. The intention is to enable local authorities and their partners to pool funding in order to target disadvantage and achieve better results.

This funding in Wirral will support projects aimed around:

- Supporting families in difficult circumstances
- Supporting children and young people with disabilities
- Promoting positive behaviour in children, young people and families

These focus of this commissioning is to benefit both the young people and the local community by working proactively to identify problems early and stop them developing.

Workstream 5: Recognise and support the role that safe and high quality neighbourhoods and thriving communities can have in transforming lives

There is recognition that there is low community cohesion in some areas and there is a need to increase 'ownership' of issues by those communities. Although there are many examples of successful community projects in Wirral, many grown from within communities, there remain some communities which lack self-confidence and aspiration. True community engagement and solutions generated by local people is a critical factor in a strategy that needs to address a range of issues and challenges in local areas.

Increasing capacity, community spirit, self help, sustainability, emotional resilience and cohesion are some of the underlying keys to reducing poverty and unlocking generational poverty traps.

Access to local services can be a factor in compounding other factors linked to poverty such as financial exclusion and health inequalities. Deprived areas often lack local financial services such as banks and cash points. Where access to supermarkets is restricted, disadvantaged families have little option but to buy their food from more expensive local shops.

There are many examples across the borough of community facilities being used to deliver services locally with the aim of increasing engagement. Key to thriving communities is the provision of positive activities for young people. Equally, however, there are communities where availability of community spaces are limited, leading to residents having to travel. As a result, families living in poverty can be further excluded.

High housing costs relative to income can impact significantly on poverty and make it difficult for families to move out of deprivation. The ability of families to access housing is hampered by high property prices and rents; 25.6% of all households in Wirral are, in theory, unable to afford open market accommodation of an appropriate size. This applies to 65.4% of all lone parent households and 36.7% of households where the head of household is not in employment.

A clear picture of the need for affordable housing is the 897 (6.34%) applicants who are registered as of December 2010 who have an urgent need for re-housing resulting from their current accommodation being unsuitable.

Poor housing standards lead to high energy bills due to inadequate heating and insulation, and can also adversely affect education, social development, and life chances. There is also an overlap with health inequalities in particular where homes are cold and damp. This can exacerbate or be one of the causes of respiratory and cardiovascular diseases such as childhood asthma, impacting significantly on children's educational achievements and school attendance.

Homelessness is more likely in low income families and is often a result of unaffordable housing costs. Although overall homelessness rates have fallen, the three main reasons

for homelessness in Wirral in 2009/10 were the termination of assured short hold tenancy (22%), mortgage arrears (18%) and parents no longer willing or able to accommodate older children (12%). Of the cases where homelessness could not be prevented in the time available and who were accepted as unintentionally homeless, the majority (65%) were considered to be priority need because the household included dependent children.

Whilst overall crime rates within Wirral compare well with other areas of the country, this masks some high rates of crime that are experienced within Wirral's most deprived areas. The distribution of the levels and patterns of crime and disorder across the Borough closely parallels the distribution of multiple deprivation, especially for young people, and there is a correlation between childhood poverty and a number of crime issues. Crime within the most deprived wards remains at higher levels (Bidston, Clughton, Birkenhead, Rock Ferry and Tranmere, Woodchurch, Leasowe, Moreton, and Saughall Massie).

Anti-Social Behaviour (ASB) has reduced over the last four years, but some 42% of all ASB incidents are related to young people and analysis shows that of these 20% of the young people concerned were under the influence of alcohol. Between Jan – March 2010 just three Area Forums (Birkenhead /Tranmere /Rock Ferry, Bidston /Clughton and Liscard /Seacombe) counted for 47.1% of all ASB incidents in Wirral. The Stronger Communities Initiative identifies hotspots where agencies need a co-ordinated focused approach to tackling crime and deprivation. In April 2010, the Morpeth Dock area was identified as a 'vulnerable locality' and a multi agency working group established. This area has the highest rates for both young offenders and young victims within Wirral.

ROOTS AND WINGS: INITIAL ACTION PLAN

Workstream	Areas for action in Wirral	What can we do?
Integrate activity to reduce child and family poverty across Wirral	Ensure partners and communities are engaged in the vision for eliminating child poverty in Wirral	<ul style="list-style-type: none"> ▪ Ensure that the draft strategy for Wirral is developed in partnership through targeted delivery planning sessions and discussions at partnership meetings ▪ Ensure that issues relating to child poverty highlighted by local people through the recent Neighbourhood Plan consultation are reflected in final Plans
	Improve information sharing about best practice and successful interventions	<ul style="list-style-type: none"> ▪ Develop the 'Roots and Wings' website as a place for sharing information in Wirral ▪ Provide regular email updates to practitioners and providers engaged in developing the strategy and action plan to encourage information sharing and innovation
	Engage more families through more accessible services and outreach	<ul style="list-style-type: none"> ▪ Work closely across the public and voluntary, community and faith sectors to develop joined up approaches to engaging families through our network of facilities and community spaces
	Ensure that services for families and disadvantaged groups are able to respond effectively when child poverty is identified as an issue	<ul style="list-style-type: none"> ▪ Roll out the free Children's Workforce Development Council child poverty training module to staff and volunteers working with children and families ▪ Undertake further work to evaluate services for families and target groups, for example people with learning disabilities or mental health issues, to develop specific actions for raising awareness and improving signposting
Target efforts to make work the best route out of poverty for Wirral parents	Remove barriers to employment for parents and target groups	<ul style="list-style-type: none"> ▪ Use the findings of the 'what works' evaluation project to drive partner approaches to ensuring that parenting and employment programmes are meeting the needs of families in relation to aspirations and readiness for work

		<ul style="list-style-type: none"> ▪ Develop further links between JobCentrePlus and Children's Centres ▪ Work with contractors for the Department of Work and Pensions Work Programme and European Social Fund Families with Multiple Disadvantage to ensure issues for Wirral families are being understood and addressed ▪ Undertake a specific planning session with partners to explore access to and flexibility of childcare ▪ Consider what further partners can do to support target groups into employment including through the Apprenticeship Programme and working with employers ▪ Work with partners to address specific travel issues impacting on access to opportunities for children and families in poverty, for example those emerging from the Council's consultation on Neighbourhood Plans
	Support parents to progress in work	<ul style="list-style-type: none"> ▪ Undertake a specific planning session to explore Wirral's approach, including in respect of actions outlined in the Liverpool City Region, which include working with local employers to promote and implement a living wage across the City Region
Provide effective support for Wirral families who need help to manage debt or problems of financial exclusion	Improve access to suitable financial services	<ul style="list-style-type: none"> ▪ Identify opportunities for making information more widely available through local networks and community assets ▪ Explore how fuel poverty interventions can link to wider issues of financial exclusion for Wirral families ▪ Work with City Region colleagues to develop a City Region Financial Inclusion Forum and review local arrangements for sharing best practice and expertise
	Improve financial literacy	<ul style="list-style-type: none"> ▪ Identify opportunities for making debt management training more widely available, for example through community organisations working in the areas most affected by financial exclusion ▪ Work with schools to ensure financial issues are covered within the curriculum
Maximise the impact of all we do to	Support effective parenting	<ul style="list-style-type: none"> ▪ Investigate opportunities to promote life skills and

improve the life chances of Wirral's children and young people		<p>positive parenting, including through increasing take up of parenting classes</p> <ul style="list-style-type: none"> ▪ Explore how the role of volunteers can be expanded, building on existing activity – for example, where children's centres are already working closely with grandparents, carers and wider family members
	Promote social and emotional development	<ul style="list-style-type: none"> ▪ Build on existing initiatives to promote the importance of early language and communication skills with parents and carers ▪ Pilot a school readiness index to provide evidence about the effectiveness of Foundation Years services
	Close the education and attainment gap	<ul style="list-style-type: none"> ▪ Work with schools to share best practice, for example about the use of pupil premium payments in improving the attainment of disadvantaged pupils
	Promote prevention and early intervention approaches to reduce health inequalities	<ul style="list-style-type: none"> ▪ Ensure that priorities being led through the ChaMPs public health network are included in partner plans and activities as appropriate
Recognise and support the role that safe and high quality neighbourhoods and thriving communities can have in transforming lives		<ul style="list-style-type: none"> ▪ Ensure Neighbourhood Plans developed in consultation with local people reflect real community need and build on community assets ▪ Explore targeting of specific communities ▪ Explore opportunities for creative employment developments and social enterprises (e.g. community shops, community-led childcare) which meet community need, tackle issues of engaging families and which can help plug gaps in the availability of suitable work opportunities, including for particular target groups ▪ Develop the role of community champions, mentors and peer-support, particularly in more deprived communities and look at more structured ways of identifying children most in need of role models ▪ Ensure that housing services are linked to pathways of support for families in poverty or at risk of poverty

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